

Exhibitor Registration Form
Human Services Living Well Expo
Saturday, September 24, 2016
8 am – 1 pm

Civic Plaza, 1800 West Old Shakopee Road, Bloomington, MN 55431

Program:

The Human Services Division's "Living Well Expo" will be held on Saturday, September 24, 2016 from 8 am– 1 pm in conjunction with the Bloomington Farmer's Market at Civic Plaza. Businesses and organizations providing services to assist adults age 50+ to live a healthy, happy, and fulfilling life are invited to participate. Space for this event is limited. If you are selected, your \$200 check will be deposited and is non-refundable. If you are not selected for this year's event, your \$200 check will be returned, and you are invited to reapply next year.

Complete the information below to apply and include a \$200 exhibitor fee by **Monday, August 1, 2016.
Checks are payable to the City of Bloomington.**

Organization/Business Name

Contact Name & Title

Address

City, State, Zip Code

Phone

E-mail

Describe the service or program that your business or organization provides below.

Tips for Exhibitors:

- Bring a tablecloth
- Make your booth fun & interactive
- Have free give-a-ways
- Make conversations with attendees
- Smile!
- Free Wi-Fi is available

Questions?

Please contact:
Amanda Crombie, Program Coordinator
(952) 563-8736
acrombie@BloomingtonMN.gov

Please check appropriate boxes below:

- ☐ Display table needed. (1—6' or 8' table will be provided)
- ☐ No table, only floor space is needed.
- ☐ Chairs needed. *Indicate number of chairs (maximum of 2 chairs): _____
- ☐ Electrical connection (if available)
- ☐ Other Needs: _____
- ☐ Check here if you would like to receive updates on future Human Services events.

Those organizations and businesses chosen by City staff coordinating the event, and whose products and/or services support the criteria listed below will be invited to participate in the 50+ Living Well Expo. Organizations and businesses physically located in Bloomington will be given priority as exhibitors. Organizations and businesses physically located outside Bloomington may be invited to participate if space is available. Participation will be evaluated using the following:

Criteria:

1. Ability of the organization/business to communicate meaningful information relevant to the event's interactive health and wellness focus for people ages 50+ and their family members.
2. Timeliness of the organization/business' request to participate.
3. Ability to provide proof of licensure or insurance upon request.

Restrictions

1. The event cannot to be used as a fundraising opportunity.
2. The event cannot to be used as a public forum. Participation is permitted on an invitation only basis.
3. Relevance of the organization's/businesses' mission or purpose to the event's focus; organizations/businesses that are primarily political or religious in nature are not invited to participate.
4. Permission to participate in the event should in no manner be construed as an endorsement or sponsorship by the City of any non-governmental agency, its mission, or message.
5. The City specifically disavows legal responsibility for the information provided by the organizations and businesses. The information, views, positions, services or opinions provided by participating organizations or businesses do not necessarily reflect the views, position or opinions of the City of Bloomington.

I understand that I am solely responsible for the items on display and any/all agents, employees and volunteers that participate in the event. I further agree to defend and indemnify the City of Bloomington, their agents and employees from and against all claims, damages, losses, and expenses, including attorney's fees, arising out of, or in any manner connected with, related to, or as a result of my participation in the event.

Picture Release Agreement: City of Bloomington staff takes pictures and videos of participants enjoying these activities for use in marketing and promotion of programs. If the organization or business does not grant permission, it will send a letter to the City of Bloomington, Human Services Division, expressing its wishes.

Organization/Business Name: _____

Exhibitor Printed Name: _____

Exhibitor Applicant Signature: _____ Date: _____

Return completed registration form along with the \$200 exhibitor fee to:

**Creekside Community Center
Attention: Amanda Crombie
9801 Penn Ave. S.
Bloomington, MN 55431**

The City of Bloomington does not discriminate on the basis of disability in the admission or access to, or treatment or employment in, its services, programs, or activities. Upon request, accommodation will be provided to allow individuals with disabilities to participate in all City of Bloomington services, programs, and activities. Upon request, this information can be available in Braille, large print, audio tape and/or electronic format.